

FORM ORG (Rev. 5/2012)

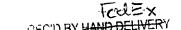
HAWAH TO STATE



HAWAII STATE ETHICS COMMISSION ORGANIZATION'S EXPENDITURES AND CONTRIBUTIONS REPORT

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REF	ORT YEAR: 2013		Amended Stateme	nt		
For L	obbying Reporting Period	d: 🚺 January 1 - I	ast day of February	March 1 - April 30	May 1	- December 31
ORO	SANIZATION INFORM	IATION				
Alli	ance of Automobil	e Manufacture	Paul V	Paul W. Hallman		
Orga	anization Name	Contact Person				
c/o	MultiState Associa	ates Inc.				
515	King Street, Suite	300				
Mail	ing Address (Number ar	nd Street or P.O. Bo	ix)			
Alexandria				VA		22314
City				State		Zip Code
(70	3) 684-1110		ccastro@mu	ltistate.com		
Tele	phone	Extension	Email Address			
PAF	T I. TOTAL EXPENDI	TURES		. 15 5		
						Total Amount
1	Preparation & Distrib	ution of Lobbying	Materials		1	0.00
2	Media Advertising				2	0.00
3	Postage				3	0.00
4	Compensation Paid t					
	List the names of all lobbyis Lobbyist Name	sis and compensation	paid to loodyists during the	Compensation Paid		
	A. Gary M. Slovin			•	10.26	
				-	32.97	
	c. Christine R. O. Ka			c	0.00	
				D		
				E		
				. F		
				GTotal Compensation		2,443.23
-	_			Total Compensation		0.00
5						0.00
6						
7						0.00
8						0.00
9						0.00
10	Other Disbursements	3			10	0.00
	Add lines 1 through	10		Total Expendi	itures 🕨	2,443.23
	Add integ i unough			I VIGI Expellul	Laivo P	_,

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EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY
List all expenditures incurred for the purpose of lobbying of \$25 or more per person per day during the statement period.

Name & Address			Amount or Value
n/a			0.00
Charle have if addition	and charte are etteched		! .
Check here if addition	onal sheets are attached		
	TURES OF \$150 OR MORE P		
List all expenditures incurred for to	he purpose of lobbying in the total sum	of \$150 or more per person during the	statement period.
Name & Address			Amount or Value
n/a			0.00
Ohaali baas if additi			
Check here if addition	onal sheets are attached		
PART II. CONTRIBUTION	IC DECEIVED	******	
		n of \$25 or more per person during the s	statement period.
Name & Address			Amount or Value
n/a			0.00
11/4			0.00
<u> </u>			
		80 mar 10 1 1 0 1	
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Check here if addition	onal sheets are attached		
			
PART III. SUBJECT ARE	AS OF LOBBYING		
Legislative and/or administrative a	action in the following areas was suppo	orted or opposed during the statement p	neriod:
Agriculture	Education	Human Services	Science, Technology & Economic Development
Communications &	Government Operation &	Intergovernmental Relations,	Tourism & Recreation
Communications & Public Utilities	Finance	International Affairs	Todasti & Recieation
Consumer Protection &	Hawaiian Affairs	Labor & Employment	
Commerce			
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other (indicate below):
Ecology, Energy	Housing	Public Safety & Corrections	
Environmental Protection		_	
I hereby certify that the states	marge made/ahove are correct an	d complete to the best of my know	ladae
The edy certainy that the state	Heyts made above are correct and	——	-))
INIO			2121113
Signature of Authorized Person	- 	Date	
Paul W. Hallman		Presiden	t
Print Name		Title	Page 2 of 2